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APPLICATION NO.	F.	ILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/016,371 12/10/2001		Ian R. Reid	HO-P02194US0	6234		
26271	7590	05/04/2006	EXAMINER			
		WORSKI, LLP	KANTAMNENI, SHOBHA			
1301 MCKIN SUITE 5100			ART UNIT	PAPER NUMBER	-	
HOUSTON,	TX 770	10-3095	1617			

DATE MAILED: 05/04/2006

Please find below and/or attached an Office communication concerning this application or proceeding.

	Application No.	Applicant(s)					
	10/016,371	REID, IAN R.					
Office Action Summary	Examiner	Art Unit					
•	Shobha Kantamneni	1617					
The MAILING DATE of this communic	1						
Period for Reply							
A SHORTENED STATUTORY PERIOD FOR WHICHEVER IS LONGER, FROM THE MAIN - Extensions of time may be available under the provisions of after SIX (6) MONTHS from the mailing date of this communing. If NO period for reply is specified above, the maximum statuling and the reply within the set or extended period for reply with Any reply received by the Office later than three months afte earned patent term adjustment. See 37 CFR 1.704(b).	ILING DATE OF THIS COMMUNIO 37 CFR 1.136(a). In no event, however, may a mication. tory period will apply and will expire SIX (6) MON II, by statute, cause the application to become AB	CATION.  eply be timely filed  ITHS from the mailing date of this communication.  BANDONED (35 U.S.C. § 133).					
Status							
1) Responsive to communication(s) filed	on <u>12 January 2006</u> .						
2a) ☐ This action is <b>FINAL</b> . 2b	☐ This action is <b>FINAL</b> . 2b) ☑ This action is non-final.						
3)☐ Since this application is in condition fo	· ·	•					
closed in accordance with the practice	e under <i>Ex parte Quayle</i> , 1935 C.D	). 11, 453 O.G. 213.					
Disposition of Claims							
4) Claim(s) <u>1-4,6,8,9,11-15 and 22</u> is/are	Claim(s) <u>1-4,6,8,9,11-15 and 22</u> is/are pending in the application.						
4a) Of the above claim(s) is/are	withdrawn from consideration.						
5)⊠ Claim(s) <u>NONE</u> is/are allowed.							
6) Claim(s) <u>1-4, 6, 8-9, 11-15, 22</u> is/are re	ejected.						
7) Claim(s) is/are objected to. 8) Claim(s) are subject to restriction	an and/or alastian requirement						
on the subject to restricted	on and/or election requirement.						
Application Papers							
9)☐ The specification is objected to by the I	Examiner.						
10) The drawing(s) filed on is/are: a	a)  accepted or b)  objected to l	by the Examiner.					
Applicant may not request that any objection	- 1	• •					
Replacement drawing sheet(s) including the							
11) ☐ The oath or declaration is objected to b	by the Examiner. Note the attached	Office Action or form P1O-152.					
Priority under 35 U.S.C. § 119							
	ocuments have been received. ocuments have been received in A	pplication No					
	the priority documents have been	received in this National Stage					
application from the Internationa  * See the attached detailed Office action		received					
ose the attached detailed office action	ior a not of the certified copies not	received.					
Attachment(s)	🗖						
<ol> <li>Notice of References Cited (PTO-892)</li> <li>Notice of Draftsperson's Patent Drawing Review (PTO Information Disclosure Statement(s) (PTO-1449 or PT Paper No(s)/Mail Date</li> </ol>	D-948) Paper No(s	Summary (PTO-413) s)/Mail Date nformal Patent Application (PTO-152)					

## **DETAILED ACTION**

This Office Action is in response to Applicant's response filed on 01/12/2006, wherein no amendment is filed.

Currently, claims 1-4, 6, 8-9, 11-15, and 22 are pending in this application.

Upon further consideration, and in view of new grounds of rejection, the rejection made in the previous office action is herein withdrawn.

## Claim Rejections - 35 USC § 102

The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless -

(b) the invention was patented or described in a printed publication in this or a foreign country or in public use or on sale in this country, more than one year prior to the date of application for patent in the United States.

Claims 1-4, and 6 are rejected under 35 U.S.C. 102(b) as anticipated by Pak et al. (US 4,851,221 of record) and as evidenced by Merck Manual of Diagnosis and Therapy (17<sup>th</sup> ED) (1999) (PTO-892), and Bell et al. (Arch Intern Med 1992: 152: pages 2441-2444, PTO-892).

Pak et al. discloses that administering a calcium supplemental composition comprising calcium citrate at a dose 1g (60 meq/day) or 1.5-2.75 g calcium/day to a postmenopausal woman is useful in treating various conditions associated to a postmenopausal woman such as <a href="https://hyperphosphatemia.ng/">hyperphosphatemia.ng/</a> and <a href="https://hyperphosphatemia.ng/">hyperphosphatemia.ng/</a> (see col.1 lines 49-50, 63-68; col.3 lines 42-43, 46; col.8 line 35-36; col.9 line 50-67; claim 20). Pak et al. disclose a daily administration.

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The calcium citrate composition of Pak et al. is prepared from pre-mix preparation with a calcium/citrate molar ratio of 1.25 of citric acid and a calcium compound such as calcium hydroxide (see abstract, and claim 18-20).

Furthermore, it is noted that, as evidenced by Bell et al. administration of <u>calcium</u> supplement, calcium carbonate (9.98 mmol [400 mg] of elemental calcium 3 times a day) to <u>women</u> between the ages of 55 + 9.3 yrs for 6 weeks i.e overlapping patient population as instantly claimed, resulted in 4.1 % increase in the high-density lipoprotein, and a 4.4 % reduction in the low-density lipoprotein cholesterol level. See abstract; page 2443, see under RESULTS.

Pak et al. does not expressly disclose the employment of the calcium composition in methods of increasing a high-density lipoprotein level (HDL) in plasma or the ratio of HDL to LDL in a postmenopausal women. Pak et al. does not expressly teach that if the high-density lipoprotein level is increased, the administration is continued for at least about two months.

However, as discussed above, the host, a postmenopausal woman, and the amount of calcium citrate, in Pak reference are same as instantly claimed. Moreover, it is well known that cardiovascular diseases becomes more prevalent after menopause according to the Merck Manual of Diagnosis and Therapy. It is also well-known that the various conditions associated to a postmenopausal woman also include hypercholesterol levels due to menopause in need of increasing a high-density lipoprotein level (HDL) in plasma or lowering low-density lipoprotein level (LDL), or increasing a ratio of HDL to LDL in said postmenopausal woman.

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Hence, according to Merck Manual, and as evidenced by Bell et al., the patient population in Pak et al. is deemed to encompass or overlap or even as same patient herein in need of increasing HDL level in plasma. Accordingly, the administration of the same compound to overlapping patient population, in the same effective amounts or doses of calcium citrate will cause the same effect, whether or not that effect is disclosed by the prior art.

Thus, with respect to the recitations wherein "high-density lipoprotein level in plasma is increased at least about 5 %", "high-density lipoprotein level in plasma is increased at least about 7.7 %", as in claims 2, 3, it is pointed out that from Pak's method, and as evidenced by Bell et al. administration of calcium supplements would inherently increase a high-density lipoprotein level (HDL) in plasma or a ratio of HDL to LDL in a postmenopausal woman. The increase of HDL would have been inherent by administration of calcium citrate in 1 g dose per day. See *Ex parte Novitski*, 26 USPQ 2d 1389, 1391 (Bd. Pat. App. & Int. 1993).

Note that even the claiming of a new use, new function or unknown property which is inherently present in the prior art does not make the claim patentable, or would not by itself carry patentable weight if the prior art teaches the same or nearly the same method steps. See *In re Best*, 562 F.2d 1252, 1254, 195 USPQ 430, 433 (CCPA 1977). See also *Eli Lilly and Co. v. Barr Laboratories Inc.* 251 F3d. 955; 58 USPQ2d 1869-1881 (Fed. Cir. 2001) with regard to inherency as it related to the claimed invention herein.

Claim Rejections - 35 USC § 103

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.

Claims 8, 9, 11-15, and 22 are rejected under 103(a) as being unpatentable over Pak et al. (US 4,851,221 of record) in view of the Merck Manual of Diagnosis and Therapy (17<sup>th</sup> ED) (1999) (PTO-892), and further in view of Bell et al. (Arch Intern Med 1992: 152: pages 2441-2444, PTO-892).

Pak et al. is as discussed above.

Pak et al. does not expressly disclose measuring the high-density lipoprotein level in said woman.

Pak et al. does not expressly disclose the administration of calcium citrate for at least 6 months, for at least 12 months as in claims 8, 9, and 15.

Bell et al teaches that the administration of calcium supplement (9.98 mmol [400 mg] of elemental calcium 3 times a day) to women between the ages of 55 +9.3 yrs for 6 weeks, resulted in 4.1 % increase in the high-density lipoprotein , and a 4.4 % reduction in the low-density lipoprotein cholesterol level. See abstract; page 2443, see under RESULTS. It is further taught that calcium supplement was administered, and a complete lipid profile was measured at weeks 0, 6, and 12 weeks. See page 2442.

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It would have been obvious to a person of ordinary skill in the art at the time the invention was made to measure the high-density lipoprotein level in postmenopausal woman who is administering calcium citrate for increasing HDL level.

One having ordinary skill in the art at the time the invention was made would have been motivated to measure the high-density lipoprotein level in a postmenopausal woman who is administering calcium citrate for increasing HDL level, since measuring the lipoprotein levels including LDL and HDL in postmenopausal woman is a routine or standard practice in medical art as taught by Bell et al..

Furthermore, measuring cholesterols or lipoproteins levels of patients or humans before, during, and after therapeutic treatments, including with calcium, and determining the administration for at least for two or six months, are well known in the art and are considered well within <u>conventional</u> skills in medical practice and pharmaceutical science, involving merely routine skill in the art.

## Conclusion

No claims are allowed.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Shobha Kantamneni whose telephone number is 571-272-2930. The examiner can normally be reached on Monday-Friday, 8am-5pm.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Sreeni Padmanabhan, Ph.D can be reached on 571-272-0629. The fax

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phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

Shobha Kantamneni, Ph.D Patent Examiner Art Unit: 1617

> SREENI PADMANABHAN SUPERVISORY PATENT EXAMINER